

RECEIVED AND FILED
WITH THE
N.J. BOARD OF DENTISTRY
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STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF DENTISTRY

IN THE MATTER OF THE APPLICATION OF:	Administrative Action
:	:
JONATHAN M. FRIEDMAN, D.D.S.	: CONSENT ORDER OF
License No. 22DI 009999	: REINSTATEMENT
:	:
FOR REINSTATEMENT OF LICENSURE TO	:
PRACTICE DENTISTRY IN THE STATE OF	:
NEW JERSEY	:

This matter was opened to the New Jersey State Board of Dentistry ("Board") upon the application of Jonathan M. Friedman, D.D.S. ("respondent"), seeking to reinstate his license to practice dentistry in the State of New Jersey. Respondent was most recently subject to a Consent Order of Voluntary Surrender of Licensure filed with the Board on April 21, 2010. The history pertaining to respondent also includes prior orders of the Board which were filed on May 31, 1995, June 6, 1994, and December 9, 1993 as amended December 22, 1993.

The matter was initially opened to the Board upon receipt of information disclosing that respondent had personally used controlled dangerous substances ("CDS") for purposes unrelated to

the practice of dentistry. Pursuant to the Consent Order filed December 9, 1993 and amended December 22, 1993, respondent's license to practice dentistry was suspended for a period of five years, thirty days active and the remainder stayed and served as a period of probation. Subsequently, on June 6, 1994, respondent's license was actively suspended for a period of thirty days. Respondent was permitted thereafter to prescribe CDS with conditions, the supervision restriction was removed and the random urine screen requirement remained in place.

According to the Consent Order of Voluntary Surrender filed on April 21, 2010, respondent's license was surrendered, and respondent was ordered to surrender his biennial, CDS and DEA registrations and prescription pads bearing his name, and abstain from the use of alcohol and CDS. In addition respondent was ordered to enroll in the Professional Assistance Program ("PAP") and comply with the recommended treatment. Prior to any application for reinstatement, respondent was required to appear before the Board to demonstrate fitness and competency, affirmatively demonstrate sobriety, provide reports from the PAP and mental health professionals, and provide the Board with a full account of his conduct from the time of his entry into treatment to his appearance pursuant to the Order.

In or about November 2010, respondent applied for the reinstatement of his dentistry license. In support of respondent's

application for reinstatement, Dr. Louis E. Baxter, M.D., FASAM, Executive Medical Director PAP, in a letter dated September 7, 2010 stated that respondent had been enrolled in the PAP since March 30, 2010 with continued negative drug and alcohol screens, and was approaching six months of continuous recovery. Dr. Baxter supported respondent's reinstatement with continued ongoing monitoring of the PAP.

In addition, Dr. Edward G. Reading, Ph.D., LCADC, Assistant Director PAP, in a letter dated September 14, 2010 strongly supported respondent's reinstatement. PAP correspondence to the Board includes a recent psychological evaluation by Dr. Arnold Washton, Ph.D., Addiction Psychologist, dated September 20, 2010 in which Dr. Washton confirmed respondent's attendance at a healthcare professionals recovery group every week. Dr. Washton supported respondent's reinstatement recommending in part that respondent continue PAP monitoring indefinitely and continue aftercare treatment for at least one year following his return to practice.

On September 15, 2010, respondent appeared at an investigative inquiry before the Board accompanied by Dr. Edward G. Reading of the PAP. Respondent admitted he was guilty of self-prescribing medication and was using medications for purposes not related to dentistry. Respondent also admitted to having written a prescription without the required counter-signing. He stated that he now realizes how important his continued recovery and practice

of dentistry are to his family.

Having reviewed the entire record, including the testimony of respondent at the investigative inquiry and the correspondence and statements of Dr. Reading and Dr. Baxter of the PAP, it appears to the Board that respondent has now demonstrated sufficient rehabilitation, fitness and ability to practice dentistry and that he is likely to comply with the conditions set forth in this Order. Respondent has provided the Board with the required records, has obtained a positive evaluation from a mental health professional, and he continues to have negative drug and alcohol screens. Respondent appears to be in solid recovery at this time, however, the Board is aware of respondent's history and any deviation from the terms of this Order will result in further immediate action to protect the public. The Board finds that the restrictions placed on respondent's practice by this Order are adequate to protect the health, safety and welfare of the public at this time and that good cause exists for entry of this Order;

IT IS ON THIS 19th DAY OF JAN, 2010

HEREBY ORDERED AND AGREED THAT:

1. Respondent's license to practice dentistry in the State of New Jersey shall be reinstated, expressly contingent upon continuing compliance with, and subject to the restrictions in, this Order.

2. Upon reinstatement, respondent shall practice only in a group setting with other licensed New Jersey dentists.

3. Upon his return to active practice, respondent shall maintain a complete log of all medications received and dispensed in his office. This log shall include the date the medication is ordered, the name of the medication, the amount ordered, the company from whom the medication is ordered, the date the medication is received, the date the medication is dispensed, the name of the patient to whom it is dispensed and the amount dispensed to the patient. Respondent agrees to release any and all information contained in the log to the Board immediately upon request.

4. Upon his return to active practice, respondent shall arrange for another New Jersey licensed dentist to counter-sign all CDS prescriptions upon issuance. Respondent shall provide the name of the co-signing dentist to the Board for its approval immediately upon his return to active practice. The co-signing dentist shall provide quarterly reports to the Board regarding respondent's compliance with this Order, and all applicable CDS rules and regulations. Respondent shall further ensure that all CDS prescriptions are issued in triplicate and provide copies of each prescription to the Board along with a copy of the patient chart on a quarterly basis. The terms of this paragraph shall continue until further order of the Board.

5. Upon reinstatement, respondent shall continue to be monitored by the PAP and continue to comply with the treatment plan established by the PAP including but not limited to:

(a) monthly face to face follow-up visits with a clinical representative from that program for the first year following his return to practice, followed by bi-monthly visits for the second year and thereafter, at a frequency to be determined by the Medical Director of the PAP;

(b) attendance at support groups, NA or AA, at a minimum of three times per week;

(c) random twice-weekly urine monitoring for the first year following his return to practice and thereafter, at a frequency to be determined by the Medical Director of the PAP; and

(d) continuation of therapy with Dr. Washton until Dr. Washton or Dr. Baxter agree to termination of formal treatment.

6. If respondent discontinues participation with the PAP or fails to comply with the conditions imposed by the program or outlined in this Order without first obtaining approval of the Board and the PAP, he shall be deemed in violation of this Order. Reduction in urine monitoring, counseling or support group attendance shall be at the discretion of the Executive Medical Director of the Program with notification to the Executive Director of the Board.

7. Respondent shall abstain from all psychoactive substances, including alcohol and controlled dangerous substances, and shall not possess any controlled dangerous substances except pursuant to a bona fide prescription written by a physician or dentist for good medical or dental cause in his own treatment. In addition, respondent shall advise any and all treating physicians and/or dentists of his history of substance abuse. Respondent shall cause any physician or dentist who prescribes medication for him which is a controlled dangerous substance to provide a written report to the Board together with patient records indicating the need for such medication. Such report shall be provided to the Board no later than two (2) days subsequent to the prescription in order to avoid confusion which may be caused by a confirmed positive urine test as a result of such medication.

8. The PAP shall submit quarterly reports, including urine results, to the Board regarding respondent's participation and compliance with all the requirements of the PAP and this Order. If respondent has a positive urine, misses an appointment without consent, or has a lapse or slip in his recovery, or if respondent terminates recommended counseling or his participation with the PAP, the PAP shall immediately inform the Board. For purposes of this paragraph, "immediately" shall mean reporting the information orally within 24 hours and following up with a written report within 48 hours.

9. Any failure by respondent to submit or provide a urine sample within twenty-four (24) hours of a request will be deemed to be equivalent to a confirmed positive urine test. In the event respondent is unable to appear for a scheduled urine test or provide a urine sample due to illness or other impossibility, consent to waive that day's test must be secured from the PAP. Personnel at the lab facility shall not be authorized to waive a urine test. In addition, respondent must provide the PAP with written substantiation of his inability to appear for a test within two (2) days, e.g. a physician's report attesting that he was so ill that he was unable to provide the urine sample or appear for the test. "Impossibility" as employed in this provision shall mean an obstacle beyond the control of respondent that is so insurmountable or that makes appearance for the test or provision of the urine sample so infeasible that a reasonable person would not withhold consent to waive the test on that day. In the event respondent will be out of the State for any reason, the PAP shall be so advised so that arrangements may be made for alternate testing.

(a) Any urine test result showing creatinine levels below 20 mg/dL and a specific gravity below 1.009 shall create a rebuttable presumption of a confirmed positive urine test. Such a specimen shall be immediately subjected to the confirming GC/MS test.

(b) Respondent shall familiarize himself with all foods, food

additives or other products (such as poppy seeds) which may affect the validity of urine screens, be presumed to possess that knowledge, and shall refrain from the use of such substances. Ingestion of such substances shall not be an acceptable reason for a positive urine screen and/or failure to comply with the urine monitoring program.

(c) The PAP may, after notifying the Board, modify the frequency of testing or method of testing.

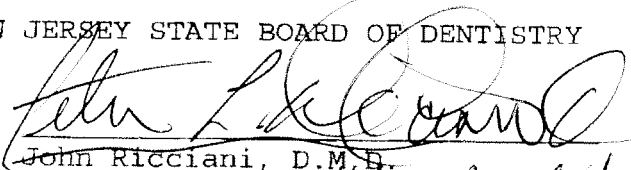
10. Respondent shall provide any and all releases to any and all parties who are participating in the monitoring, treatment or other program as outlined in this Order, including but not limited to his psychotherapist and the PAP, as may be required in order that all reports, records, and other pertinent information may be provided to, and utilized by the Board in a timely manner. It is understood that such documents or reports may be made public in any licensing proceeding.

11. It is expressly understood and agreed that continued licensure with restrictions as ordered herein is contingent upon strict compliance with all of the aforementioned conditions. Upon the Board's receipt of any information indicating that any term of the within Order has been violated in any manner whatsoever, including, but not limited to, a verbal report of a confirmed positive urine or any other evidence that respondent has used an additive substance, a hearing shall be held on short notice before

the Board or before its representative authorized to act on its behalf. The proofs at such a hearing shall be limited to evidence of the particular violation at issue. Any confirmed positive urine test shall be presumed valid, and respondent shall bear the burden of demonstrating its invalidity.

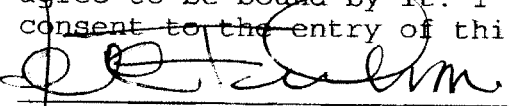
NEW JERSEY STATE BOARD OF DENTISTRY

By:


John Ricciani, D.M.D.
President

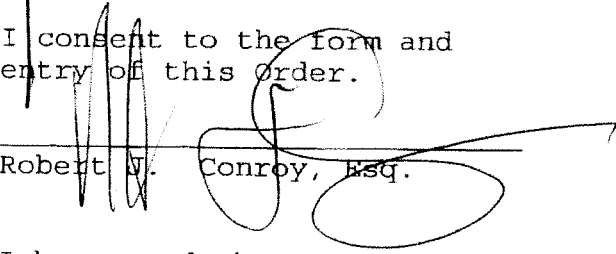
Acting President

I have read and I understand
the terms of this Order and
agree to be bound by it. I
consent to the entry of this Order.


Jonathan M. Friedman, D.D.S.

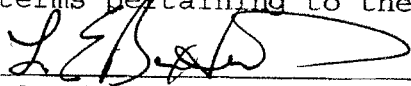
1/5/2011
Date

I consent to the form and
entry of this Order.


Robert J. Conroy, Esq.

1/11/2011
Date

I have read the terms of this Order
and agree on behalf of the Professional
Assistance Program to comply with its
terms pertaining to the PAP.


Edward Reading, Ph.D., LCADC
Professional Assistance Program

1/5/11
Date

Louis E. Baxter Sr, MD
Executive Medical Director
PAPNJ